

A communication periodical for our clients, staff & the community at large

# The Chronicle

A Paterson Counseling Center Newsletter

## Special points of interest:

- PCC works on improvement plans for 2012
- Training a big focus for counselors in 2012
- PCC participates in Guest medication program referred to as GEMS
- Orientation video viewable from PCC website
- Website hits exceeded 50,000

## Mental Health & the Workplace

The Shaw Trust reported in 2010 that only 2 in 10 employers have a reactive or proactive mental health policy to support staff with mental ill health. What role does leadership have in addressing this challenging issue?

Employee mental well-being should be an integral part of the boardroom agenda, on a par with physical health. Leaders should insist that regular monitoring of progress or issues is reported to the board. The Chartered Institute of Personnel and Development (CIPD) has found that 70% of employee mental health problems are either directly caused by work or by a combination of work and home. In light of this, there simply is no excuse for this not being a mainstream issue for leaders to address. By proactively managing mental well-being in the workplace, leaders are not only dealing with their legal and ethical responsibilities, they are also looking after their bottom line as well. Absenteeism and presenteeism are responsible for losing British organizations billions of pounds, so how can this subject be ignored.

All employers should include safeguarding mental well-being into their standard operations, particularly when employees and/or organisations are embarking on change processes, which can be and are very challenging times for everyone. Training from the leadership down in proactively managing mental well-being, including offering additional support to staff or simply leading by example, is essential. Safety net support such as coaching and occupational health needs to be incorporated into health and well-being policies.

Leaders should be ensuring that management have a huge positive impact on mental health. Good line managers are essential in spotting early signs of distress and initiating early intervention, whereas poor line managers may make the situation worse or even be the cause of mental health problems through their approach, management style of behaviour.

Leaders should be insisting that comprehensive and, more importantly, mandatory mental health training for line managers is introduced and embedded into the culture and development plans for their employees. This training and change in culture will ensure that the organization develops employee resilience and emotional well-being.

Sadly it is all too easy to pension a person off on medical grounds without seeing people as more than cogs in the machine. Failing to recognize the need for support and the necessity for introducing policies and procedures offering support is costly in the long-term as human beings need support at times in their lives, even leaders. Source ezine articles, Steve Scott.

## Inside this issue:

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# Harsh Truths About Cocaine

## Know the Facts

*Cocaine affects your brain.* The word "cocaine" refers to the drug in both a powder (cocaine) and crystal (crack) form. It is made from the coca plant and causes a short-lived high that is immediately followed by opposite, intense feelings of depression, edginess, and a craving for more of the drug. Cocaine may be snorted as a powder, converted to a liquid form for injection with a needle, or processed into a crystal form to be smoked.

*Cocaine affects your body.* People who use cocaine often don't eat or sleep regularly. They can experience increased heart rate, muscle spasms, and convulsions. If they snort cocaine, they can also permanently damage their nasal tissue.

*Cocaine is addictive.* Cocaine interferes with the way your brain processes chemicals that create feelings of pleasure, so you need more and more of the drug just to feel normal. People who become addicted to cocaine start to lose interest in other areas of their life, like school, friends, and sports.

## Think Hard If You're Considering Risking It

*Know the law.* Cocaine--in any form--is illegal.

*Stay informed.* Even first-time cocaine users can have seizures or fatal heart attacks.

*Know the risks.* Combining cocaine with other drugs or alcohol is extremely dangerous. The effects of one drug can magnify the effects of another, and mixing substances can be deadly.

## Know the Signs

How can you tell if a friend is using cocaine? Sometimes it's tough to tell. But there are signs you can look for. If your friend has one or more of the following warning signs, he or she may be using cocaine or other illicit drugs:

- Red, bloodshot eyes
- A runny nose or frequently sniffing
- Acting withdrawn, depressed, tired, or careless about personal appearance
- Losing interest in work, school, family, or activities he or she used to enjoy
- Frequently needing money

What can you do to help someone who is using cocaine? Be a real friend. Save a life. Encourage your friend to stop and to seek professional help.

## Commonly Asked Questions--and the Answers

Q. Is cocaine really still a problem?

A. Yes. While the number of cocaine users has decreased from what was witnessed in the mid-1980's, there have been nearly 2 million cocaine users every year since 1992.

Q. Isn't crack less addictive than cocaine because it doesn't stay in your body very long?

A. No. Both cocaine and crack are powerfully addictive. The length of time it stays in your body doesn't change that.

*Source: National Clearinghouse For Alcohol and Drug Information*